CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

P.O. Box 12070

FORM C/OH COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.		1 ACCOUNT # (Ethics Commission Filers)	2 Total pages filed:			
3 CANDIDATE / OFFICEHOLDER NAME	MSY MRS MRS FIRST JOSE	Gerardo	OFFICE USE ONLY			
	NICKNAME LAST ROSILES	SUFFIX	CITY C 2011 APR			
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; IGO \ Sun Chanot Dr. E	STATE; ZIP CODE PASO TX 79938	Date Hand-delivered or Date Postmarked			
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER (918) 373-4671	EXTENSION	Receipt # Amount U			
6 CAMPAIGN TREASURER NAME	MS/MRS/MR FIRST LQUYO, NICKNAME LAST	SUFFIX	Date Imaged			
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	cardenas street ADDRESS (NO PO BOX PLEASE); APT/SUITE#; 1901 Sun Chanot Dr	CITY; STATE;	ZIP CODE TX, 79938			
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER (915) 373 - 6289	EXTENSION				
9 REPORTTYPE	January 15 30th day before election July 15 8th day before election	Runoff Exceeded \$500 limit	15th day after campaign treasurer appointment (officeholder only) Final report (Attach C/OH - FR)			
10 PERIOD COVERED	Month Day Year THROUGH	Month Day 4/13/	Year			
11 ELECTION	Month Day Year ELECTION TYPE S/14/11 Primary	Runoff b	General Special			
12 OFFICE	OFFICE HELD (If any)	13 OFFICE SOUGHT (IF known	sentative Dist.6			
14 NOTICE OF DIRECT CAMPAIGN EXPENDITURE BY OTHER INDIVIDUALS	DIRECT CAMPAIGN EXPENDITURES ARE CAMPAIGN EXPENDITURES MADE BY OTHERS WITHOUT THE CANDIDATE'S PRIOR CONSENT OR APPROVAL. CANDIDATES ARE REQUIRED TO DISCLOSE THIS INFORMATION ONLY IF THEY RECEIVE NOTIFICATION OF THE DIRECT CAMPAIGN EXPENDITURE.					
	Name Address / PO Box; Apt. / Suite #; City; State; Zip Cod	e				
additional pages	N/A	·				
GO TO PAGE 2						

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

15 C/OH NAME			6 ACCOUNT	# (Ethics Commission Filers)	
Jose (Gerardo	Rosiles			
17 NOTICE FROM POLITICAL	THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.				
COMMITTEE(S)	COMMITTEE TYPE	COMMITTEE NAME			
		N/A			
	GENERAL	COMMITTEE ADDRESS	 -		
	SPECIFIC			CIT 2011	
. 1		N/A		APR C	
		COMMITTEE CAMPAIGN TREASURER NAME			
additional pages		NA		F ERK	
		COMMITTEE CAMPAIGN TREASURER ADDRESS		DEI	
	·	N/A		РТ.	
18 CONTRIBUTION TOTALS		POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN S, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED		0.00	
		POLITICAL CONTRIBUTIONS THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	0.00	
EXPENDITURE TOTALS	3. TOTAL P	OLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZ	ED \$	0.00	
	4. TOTAL	POLITICAL EXPENDITURES	\$ -	723.80	
CONTRIBUTION BALANCE		OLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DA DRTING PERIOD	^{AY} \$	0.00	
OUTSTANDING LOAN TOTALS		PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF TH BY OF THE REPORTING PERIOD	^{∃E} \$	0.00	
! swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code. Swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code. Signature of Candidate or Officeholder Signature of Candidate or Office					
AFFIX NOTARY STAM		me, by the said Jose Gerardo Rosi,	les	Ahio Aho	
Sworn to and subscribed before me, by the said \(\infty \i					
Jacquelin	e I/lyva	a) Jacqueline S. Leyva	Md.	tara	
Signature of officer adm	inistering oath	Printed name of officer administering oath /	Title of of	ficer administering oath	

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

Advertising Expense Accounting/Banking Consulting Expense	Gift/Awards/Memorials Expense Salaries/Wages/Co Legal Services Solicitation/Fundra Food/Beverage Expense Travel In District	Intract Labor Loan Repayment/Reimbursement Ising Expense Transportation Equipment & Related Expense Contributions/Donations Made By					
Event Expense Fees	Polling Expense Travel Out Of Dist Printing Expense Office Overhead/R						
The Instruction Guide explains how to complete this form.							
1 Total pages Schedule G:	2 FILER NAME	3 ACCOUNT # (Ethics Commission Filers)	1				
^	Jose Gerardo Ro	09/120					
4 Date	5 Payee name		1				
3/14/2011	City of El 1	Pa so					
6 Amount (\$)	7 Payee address; City; State; Zip Code		1				
\$250.00	2 Civic Center Plaza	, El Paso, TX, 79901					
Reimbursement from political contributions intended							
8 PURPOSE	(a) Category (See categories listed at the top of this schedule)	(b) Description (If travel outside of Texas, complete Schedule T)					
OF EXPENDITURE	Fees	Apphastion filing fee for May 14,	<u> </u>				
		2011 General Electron, District 6	4				
Date	Payee name	•					
3/23/11	Go Daddy. com , Inc.						
Amount (\$)	Payee address; City; State; Zip Code		1				
19.38	144155 N. Hayden Rd , Suite 219						
Reimbursement from political contributions							
intended	Scottsdale, 42,		_				
PURPOSE	Category (See categories listed at the top of this schedule)	Description (Iftravel outside of Texas, complete Schedule T)					
OF EXPENDITURE	Website related	Acquestion of domain gerardorosts.					
· .		Purchase of wide hosting package	4				
Date	Payee name						
4/8/11	Go Daddy com Inc.						
Amount (\$)	Payee address; City; State; Zip Code	21 27-210	1				
9.00	14455 N. Hayden	Rd., Suite 219					
Reimbursement from political contributions	Scottsdale, AZ	STAL S					
Intended	scorregalle, HE	, 85260	4.				
PURPOSE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)	1				
OF EXPENDITURE	Website related	Upgrade for webhosting					
• ·		rychuge	삵				
Date	Payee name						
4/12/2011	Cross and Obertie	ih, WI, '84950	F .				
Amount (\$)	Payee address; City; State; Zip Code],				
3445,42	916 Byrd Ave., Neens	uh, WI, 54956					
Reimbursement from political contributions			-				
intended			<u> </u>				
PURPOSE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T) was Ruchase of boun and yard	-				
OF EXPENDITURE	Printing	Louchase by longic and ford					
Signs (100 et.)							
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED							